Case 17-06963 Doc 1 Filed 03/07/17 Entered 03/07/17 14:37:05 Desc Main Document Page 1 of 49

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	Writ	e the name that is on	Sarah	
	pictu	our government-issued icture identification (for xample, your driver's	First name	First name
	license or passport). Bring your picture		Middle name	Middle name
		Weller		
		identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you nun Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number N)	xxx-xx-3098	

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Case number (if known)

Debtor 1 Sarah Weller

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
		■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)			
	doing business as names	Dudinicus Hame(g)	Dadiness Hamo(d)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		116 Hubbard Street				
		Thornton, IL 60476 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Document Case number (if known) Debtor 1 Sarah Weller

Par	t 2: Tell the Court About	Your E	Bankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ C	Chapter 7				
			Chapter 11				
			Chapter 12				
		□ c	Chapter 13				
В.	How you will pay the fee		about how yo	ou may pay. Typ attorney is sub	pically, if you are paying the fee yo	with the clerk's office in your local court for mourself, you may pay with cash, cashier's check, alf, your attorney may pay with a credit card or court	, or money
					tallments. If you choose this option to (Official Form 103A).	n, sign and attach the Application for Individual	ls to Pay
			I request tha	t my fee be wa	aived (You may request this option	only if you are filing for Chapter 7. By law, a ju	
			but is not req applies to you	uired to, waive ur family size a	your fee, and may do so only if yond you are unable to pay the fee in	ur income is less than 150% of the official pove installments). If you choose this option, you me	rty line that ust fill out
						ial Form 103B) and file it with your petition.	
9.	Have you filed for	_					
J .	bankruptcy within the	■ N					
	last 8 years?	☐ Ye	es.				
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ N	0				
	cases pending or being filed by a spouse who is	— N					
	not filing this case with you, or by a business partner, or by an affiliate?		00.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	■ N	Go to I	ine 12.			
	residence?			ur landlord obt	ained an eviction judament agains	you and do you want to stay in your residence	.2
		□ Ye	_	No. Go to line		. you and do you want to stay in your residence	• :
						ludement Accinct Vou (Farra 404A) and State	ith th:-
				bankruptcy pe		ludgment Against You (Form 101A) and file it w	viin this

Document Page 4 of 49 Case number (if known) Debtor 1 Sarah Weller Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Page 5 of 49 Document Case number (if known) Debtor 1 Sarah Weller

Explain Your Efforts to Receive a Briefing About Credit Counseling

Part 5:

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Sarah Weller			Case num	ber (if known)		
Par	t 6: Answer These Quest	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.		business debts? Business debts are debts are debts are debts are debts are debts.			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you	u owe that are not consumer debts or busir	ess debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapt	ter 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	Yes.	I am filing under Chapter 7 are paid that funds will be	 Do you estimate that after any exempt pr available to distribute to unsecured credito 	operty is excluded and administrative expenses rs?		
	administrative expenses		■ No				
	are paid that funds will be available for		☐ Yes				
	distribution to unsecured creditors?		_ 133				
18.	How many Creditors do	■ 1-49		□ 1,000-5,000	□ 25,001-50,000		
	you estimate that you owe?	☐ 50-99		5001-10,000	☐ 50,001-100,000		
	owe?	□ 100-1	99	1 0,001-25,000	☐ More than100,000		
		□ 200-9	99				
19.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	\$50,0	01 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion		
			001 - \$500,000	□ \$50,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		□ \$500,	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ Iviore than \$50 billion		
20.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
			001 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion		
		□ \$500,	001 - \$1 million	□ \$100,000,001 - \$500 million	indire than \$50 billion		
Par	t7: Sign Below						
For	you	I have ex	amined this petition, and I d	declare under penalty of perjury that the info	ormation provided is true and correct.		
				r 7, I am aware that I may proceed, if eligib e relief available under each chapter, and I	le, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.		
				d not pay or agree to pay someone who is the notice required by 11 U.S.C. § 342(b).	not an attorney to help me fill out this		
		I request	relief in accordance with the	e chapter of title 11, United States Code, s	pecified in this petition.		
		bankrupt and 3571	cy case can result in fines u	ent, concealing property, or obtaining mone up to \$250,000, or imprisonment for up to 2	y or property by fraud in connection with a 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Sarah V		Signature of Dek	otor 2		
		Executed		Executed on			
			MM / DD / YYYY		MM / DD / YYYY		

Debtor 1 Sarah Weller Document Page 7 of 49 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Cheri C ARDC	costa wTucker & Associates, L	td. Date	March 7, 2017	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Cheri Cos	ta wTucker & Associates, Ltd.	ARDC		
	& ASSOCIATES, LTD.			
Firm name				
5210 West	: 95th Street			
Oak Lawn	, IL 60453			
Number, Street,	City, State & ZIP Code			
Contact phone	708/425.9530	Email address		
6285966				
Bar number & S	tate			

	DOCUM	ent Page 8 of 49	
mation to identify your	case:		
Sarah Weller			
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
	Sarah Weller First Name First Name	Sarah Weller First Name Middle Name First Name Middle Name	Sarah Weller First Name Middle Name Last Name First Name Middle Name Last Name

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Dos	Cummarina Vaur Acceta		
Par	1: Summarize Your Assets	Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	70,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	22,670.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	92,670.00
Par	2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	72,344.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	70,795.59
	Your total liabilities	\$	143,139.59
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,919.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,845.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal	, family, or

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

Debtor 1 Sarah Weller _____ Document Page 9 of 49 Case number (if known) _____

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

\$_____4,161.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	(Case 17-06963	Doc 1		03/07/17 ument	Entered 03/07/1	7 14:37:05	Desc	Main
Filli	in this info	ormation to identify y	our case and th			1 7000. 107 (7) 437			
Deb	otor 1	Sarah Weller First Name	Middle	e Name		Last Name			
	otor 2 use, if filing)	First Name	Middle	Name		Last Name			
Unit	ed States	Bankruptcy Court for the	ne: NORTHER	N DIST	RICT OF ILLIN	NOIS			
Cas	e number					-			Check if this is an amended filing
Sc	hedu	orm 106A/B ule A/B: Pro	<u> </u>						12/15
hink nforr	it fits best. mation. If mere every qu	Be as complete and ac nore space is needed, at	curate as possibl tach a separate sh	e. If two heet to th	married people iis form. On the	in asset fits in more than one are filing together, both are a top of any additional pages,	equally responsil	ole for suppl	ying correct
						land, or similar property?			
_			itable interest in a	ily resid	ence, bunding,	iana, or similar property:			
	No. Go to I								
-	Yes. Whei	re is the property?							
1.1				What	is the property	? Check all that apply			
	116 Huk	bard Street			Single-family h	nome	Do not deduct se	ecured claims	or exemptions. Put
	Street addre	ess, if available, or other descr	iption	_	Duplex or mult	ti-unit building	the amount of ar	aims on Schedule D: Secured by Property.	
					Condominium	or cooperative	Creditors with r	iave Ciairis C	secured by Property.
					Manufactured	or mobile home			
	Thornto	on IL	60476-0000		Land	or modile nome	Current value of entire property		urrent value of the ortion you own?
	City	State	ZIP Code		Investment pro	operty	\$70,0	-	\$70,000.00
					Timeshare		Describe the na	ature of your	ownership interest
					Other	in the manual O or	(such as fee sir a life estate), if		y by the entireties, or
				wno	nas an interest Debtor 1 only	in the property? Check one	a me estatej, n	KIIOWII.	
	Cook			_	Debtor 2 only				
	County				Debtor 1 and [Debtor 2 only			
						the debtors and another	☐ Check if the (see instruction		nity property
					information your	ou wish to add about this item on number:	ı, such as local		
2	Add the d	ollar value of the por	tion you own fo	r all of	our entries f	rom Part 1, including any	entries for		¢70,000,00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

pages you have attached for Part 1. Write that number here......

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$70,000.00

Deb	tor 1 S	arah Weller		Docum	ient i	age 11	Of 49 Case	e number (if kno	wn)		
3. C a	ars, vans,	trucks, tractors, s	port utility vehi	icles, motorcyc	cles						
	No										
	Yes										
0.4	Malaa	Hyundai		W/ h i				Do not deduct	secured cl	aims or exemptions. Put	
3.1	Make: Model:	Elantra		Who has an int Debtor 1 only	-	oroperty? Chec	k one	the amount of	any secure	ed claims on Schedule Dams Secured by Property.	:
	Year:	Liantia		■ Debtor 1 only	•					Current value of the	
	Approxin	nate mileage:		Debtor 1 and	•	У		Current value entire proper		portion you own?	
	Other inf	ormation:		☐ At least one	of the debtors	and another					
						_		¢12	00.00	\$12,000.0	าก
				☐ Check if this (see instruction		ity property		Ψ12,	000.00	φ12,000.C	_
5 A .p	ages you 3: Descri	ollar value of the po have attached for the Your Personal and or have any legal of	Part 2. Write th	at number her	e					\$12,000.00 Current value of the portion you own? Do not deduct secured	
E		goods and furnish Major appliances, fu scribe		china, kitchenwa	are				(claims or exemptions.	
		Hou	sehold good	s and furnish	ings					\$500.	.0
E		Televisions and radi including cell phone				nent; compute	ers, printers,	, scanners; mus	ic collecti	ons; electronic device	S
E		Antiques and figurin other collections, m			rtwork; book	s, pictures, o	r other art o	bjects; stamp, c	oin, or ba	seball card collections	3;
9. E 0	quipment xamples:	for sports and hok Sports, photographi musical instruments	c, exercise, and	other hobby eq	quipment; bio	cycles, pool to	ables, golf c	clubs, skis; cand	es and ka	ıyaks; carpentry tools;	
10. F	Yes. De		aune ammunitia	on and related	equipment						
	<i>Exampies</i> I _{No} I Yes. De	: Pistols, rifles, shoto scribe	guns, ammunitio	on, and related (equipment						

Official Form 106A/B Schedule A/B: Property page 2

Document Page 12 of 49 Debtor 1 Case number (if known) Sarah Weller 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$100.00 Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$600.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... Cash \$20.00 Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... Checking and savings account with Chase \$50.00 Bank 17.1. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No Official Form 106A/B Schedule A/B: Property

Case 17-06963

Doc 1

Filed 03/07/17

Entered 03/07/17 14:37:05

Desc Main

		Case 17-009	63 DOC 1	Pocument	Page 13 of 49	14.37.05 L	Jest Main
D	ebtor 1	Sarah Weller		Document	Case nu	ımber (if known)	
	☐ Yes.	Give specific informat	ion about them Issuer name:				
21		nent or pension acco les: Interests in IRA,		(k), 403(b), thrift saving	s accounts, or other pension o	ा profit-sharing pla	ans
	Yes.	List each account sep Ty	earately. ype of account:	Institution r	ame:		
				Unum 40	(k)		\$10,000.00
22	Your sl		oosits you have ma		inue service or use from a cor ttric, gas, water), telecommuni		s, or others
				Institution r	ame or individual:		
23	. Annuiti	es (A contract for a p	eriodic payment of	money to you, either for	life or for a number of years)		
	☐ Yes	Issuer	name and descripti	on.			
24	26 U.S.0	s in an education IR C. §§ 530(b)(1), 529A		n a qualified ABLE pro	gram, or under a qualified s	tate tuition progr	ram.
	■ No □ Yes	Instituti	ion name and desc	ription. Separately file th	e records of any interests.11 l	J.S.C. § 521(c):	
25	■ No	equitable or future		rty (other than anythin	g listed in line 1), and rights	or powers exerc	isable for your benefit
26	Examp ■ No	les: Internet domain r	names, websites, pr	ts, and other intellecturoceeds from royalties a	al property nd licensing agreements		
	☐ Yes.	Give specific informa	tion about them				
27	Examp ■ No		exclusive licenses,	ngibles cooperative association	n holdings, liquor licenses, pro	fessional licenses	
		Give specific informa					
M	oney or p	property owed to yo	u?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28	. Tax ref	unds owed to you					
	■ No □ Yes.	Give specific informat	ion about them, inc	luding whether you alre	ady filed the returns and the ta	ax years	
29	■ No	les: Past due or lump		usal support, child supp	ort, maintenance, divorce settle	ement, property se	ettlement
	⊔ Yes.	Give specific informat	ion				
30	Examp				efits, sick pay, vacation pay, v	vorkers' compens	ation, Social Security
	■ No □ Yes.	Give specific informa	tion				

Official Form 106A/B Schedule A/B: Property page 4

	Case 17-06963	Doc 1	Filed 03/07/17 Document	Entered 03/07/17 14:37:05 Page 14 of 49 Case number (if known)	Desc Main
Debtor 1	Sarah Weller		Doddinone	Case number (if known)	
	s in insurance policies les: Health, disability, or life	insurance; h		HSA); credit, homeowner's, or renter's insurar	nce
☐ Yes. N	Name the insurance compa Comp	ny of each po pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
If you a someon	erest in property that is dure the beneficiary of a living the has died. Give specific information			d surance policy, or are currently entitled to rece	eive property because
Example No	against third parties, who les: Accidents, employment Describe each claim			t or made a demand for payment to sue	
■ No	ontingent and unliquidate Describe each claim	ed claims of	every nature, includin	g counterclaims of the debtor and rights to	set off claims
■ No	ancial assets you did not Give specific information	already list			
				ny entries for pages you have attached	\$10,070.00
Part 5: Des	cribe Any Business-Related	Property You	Own or Have an Interest I	n. List any real estate in Part 1.	
No. Go	wn or have any legal or equit to Part 6. o to line 38.	able interest i	n any business-related pi	roperty?	
	cribe Any Farm- and Comme ou own or have an interest in fa			n or Have an Interest In.	
■ No. 0	own or have any legal or Go to Part 7. Go to line 47.	equitable in	terest in any farm- or c	commercial fishing-related property?	
Part 7:	Describe All Property You (Own or Have a	n Interest in That You Did	Not List Above	
Example ■ No	have other property of ar les: Season tickets, country	club membe		,	

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Case number (if known) Document Debtor 1 Sarah Weller

List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 \$70,000.00 55. Part 2: Total vehicles, line 5 56. \$12,000.00 Part 3: Total personal and household items, line 15 \$600.00 57. 58. Part 4: Total financial assets, line 36 \$10,070.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total 62. \$22,670.00 \$22,670.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$92,670.00

Official Form 106A/B Schedule A/B: Property page 6

		1700.000		3
Fill in this inform	nation to identify your	case:		
Debtor 1	Sarah Weller			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the I	Property	You	Claim a	s Exemp	ıt
---------	----------	-------	----------	-----	---------	---------	----

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
\$70,000.00	\$15,000.00		735 ILCS 5/12-901
		100% of fair market value, up to any applicable statutory limit	
\$500.00		\$500.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$100.00		\$100.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$20.00		\$20.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$50.00		\$50.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$70,000.00 \$70,000.00 \$100.00	\$500.00 \$\$50.00 \$\$50.00 \$\$\$50.00	\$70,000.00 \$70,000.00 \$15,000.00 \$100% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit \$20.00 \$20.00 \$50.00 \$100% of fair market value, up to any applicable statutory limit \$20.00 \$20.00 \$30.00 \$30.00 \$30.00 \$30.00 \$30.00 \$30.00 \$30.00 \$30.00 \$30.00 \$30.00 \$30.00 \$30.00 \$30.00 \$30.00

Case 17-06963 Doc 1 Filed 03/07/17 Entered 03/07/17 14:37:05 Desc Main Document Page 17 of 49 Debtor 1 Sarah Weller Case number (if known) Brief description of the property and line on *Schedule A/B* that lists this property Current value of the Amount of the exemption you claim Specific laws that allow exemption portion you own Copy the value from Check only one box for each exemption. Schedule A/B Unum 401(k) 735 ILCS 5/12-1006 \$10,000.00 \$10,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

		Document	Page 18	of 49		
Fill in this information to ide	entify your case	et				
Debtor 1 Sarah W	/oller					
First Name	venei	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing) First Name		Middle Name	Last Name		•	
United States Bankruptcy Cou	urt for the: NC	ORTHERN DISTRICT OF	II I INOIS			
Officed States Barikrupicy Cot	in ioi ine. No	DRITIERIN DISTRICT OF	ILLINOIS		-	
Case number						
(if known)					☐ Checl	k if this is an
					amen	ded filing
Official Form 106D						
Schedule D: Cred	ditors Wh	o Have Claims	s Secured	by Propert	V	12/15
)	
Be as complete and accurate as is needed, copy the Additional P						
number (if known).	age, illi it out, ilui	inber the entries, and attach	i it to this form. Of	i the top of any additio	nai pages, write your na	ille allu case
1. Do any creditors have claims	secured by your r	property?				
☐ No. Check this box and			nar schadulas Vo	ou have nothing else t	o report on this form	
_		ii to the court with your off	iei scriedules. T	od flave flottilling else t	o report on this form.	
Yes. Fill in all of the inf	ormation below.					
Part 1: List All Secured C	laims					
2. List all secured claims. If a cre	editor has more tha	an one secured claim, list the	creditor separately	Column A	Column B	Column C
for each claim. If more than one of	reditor has a partic	cular claim, list the other credi	itors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in	n alphabetical orde	er according to the creditor's n	ame.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Bank Of The West	Desc	ribe the property that secure	es the claim:	\$15,075.00	\$12,000.00	\$3,075.00
Creditor's Name		ndai Elantra		*************************************	<u> </u>	
	1.7 4.					
2527 Camino Ramor	n As of apply.	the date you file, the claim	is: Check all that			
San Ramon, CA 945		ontingent				
Number, Street, City, State & Zip		nliquidated				
	☐ Di	sputed				
Who owes the debt? Check on	e. Natu i	re of lien. Check all that app	ly.			
■ Debtor 1 only	☐ Ar	agreement you made (such	as mortgage or sec	ured		
Debtor 2 only	C	ar Ioan)				
Debtor 1 and Debtor 2 only	☐ St	atutory lien (such as tax lien,	mechanic's lien)			
☐ At least one of the debtors and	_	dgment lien from a lawsuit	,			
☐ Check if this claim relates to		her (including a right to offset)			
community debt		(,			
	•					
Oper						
Acti	6 Last					
Date debt was incurred 2/17/		Last 4 digits of account no	umber 2968			
	<u> </u>					
O O Ha Damk Hama Mart	D		411-1	¢E7 000 00	¢70 000 00	¢0.00
2.2 Us Bank Home Mort Creditor's Name		ribe the property that secur		\$57,269.00	\$70,000.00	\$0.00
Oreditor 3 Name		Hubbard Street Thorn 6 Cook County	iton, IL			
Attn: Bankruptcy	0047	o Cook County				
Po Box 5229		the date you file, the claim	is: Check all that			
Cincinnati, OH 4520	apply. 1 □ ○.	ontingent				
Number, Street, City, State & Zip		nliquidated				
Number, Street, City, State & Zip		sputed				
Who owes the debt? Check on		sputed re of lien. Check all that appl	lv.			
_		agreement you made (such	•	ured		
Debtor 1 only		r agreement you made (such : ar loan)	as mongage or sec	urou		
Debtor 2 only	_	•				
Debtor 1 and Debtor 2 only		atutory lien (such as tax lien,	mecnanic's lien)			
At least one of the debtors and	another 🗀 Ju	dgment lien from a lawsuit				

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Debtor 1	Sarah Wel	ler		C	Case number (if know)	
_	First Name	Middle N	lame Last Name		_	
	f this claim re inity debt	elates to a	Other (including a right to offset)			
Date debt w	vas incurred	Opened 09/14 Last Active 2/01/17	Last 4 digits of account number	0565		
If this is t		of your form, add	Column A on this page. Write that number the dollar value totals from all pages.	here:	\$72,344.00 \$72,344.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Document	Page 20) of 49	
Fill in th	is information to identify your	case:			
Debtor 1	Sarah Weller				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,		Middle Name	Last Name		
	3,				
United S	tates Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS		
Case nu (if known)	mber				☐ Check if this is an
					amended filing
	l Form 106E/F dule E/F: Creditors W	/ho Have Unsecured	Claims		12/15
any execu Schedule Schedule left. Attacl	tory contracts or unexpired leases G: Executory Contracts and Unexp D: Creditors Who Have Claims Sec	that could result in a claim. Also I pired Leases (Official Form 106G). I ured by Property. If more space is	ist executory c Do not include a needed, copy t	ontracts on Schedule A/B: Pr any creditors with partially se he Part you need, fill it out, no	RIORITY claims. List the other party to operty (Official Form 106A/B) and on cured claims that are listed in umber the entries in the boxes on the o of any additional pages, write your
Part 1:	List All of Your PRIORITY Ur	secured Claims			
_	ny creditors have priority unsecure	d claims against you?			
N	o. Go to Part 2.				
☐ Ye					
Part 2:	List All of Your NONPRIORIT				
3. Do aı	ny creditors have nonpriority unsec	cured claims against you?			
□ N	 You have nothing to report in this p 	art. Submit this form to the court with	your other sche	dules.	
■ Ye	es.				
unse	all of your nonpriority unsecured cl cured claim, list the creditor separatel one creditor holds a particular claim, I 2.	y for each claim. For each claim listed	d, identify what ty	pe of claim it is. Do not list clain	ms already included in Part 1. If more
,					Total claim
	Advocate Health Care	Last 4 digits of acc	ount number	5537	\$155.55
	Nonpriority Creditor's Name PO Box 3039	When was the deb	t incurred?		
	Hinsdale, IL 60522-3039	When was the deb	i ilicuireu :		
	Number Street City State Zlp Code	As of the date you	file, the claim i	s: Check all that apply	
'	Who incurred the debt? Check one.				
I	Debtor 1 only	☐ Contingent			
l	Debtor 2 only	☐ Unliquidated			
ı	Debtor 1 and Debtor 2 only	☐ Disputed			
ı	\square At least one of the debtors and an		RITY unsecured	l claim:	
	☐ Check if this claim is for a com				
	debt s the claim subject to offset?	Obligations arising report as priority claim		ration agreement or divorce tha	t you did not
	_	<u>'</u> ' '		g plans, and other similar debts	
	■ No	•	•	• •	
l	☐ Yes	Other. Specify	wedical ser	vices	

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Debtor 1 Sarah Weller Case number (if know) 4.2 \$577.27 **Advocate Health Care** Last 4 digits of account number 0614 Nonpriority Creditor's Name 2701 High Point Dr. When was the debt incurred? Suite 124 Lewisville, TX 75067 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical services ☐ Yes 4.3 **Advocate Health Care** Last 4 digits of account number 0614 \$535.38 Nonpriority Creditor's Name 2701 High Point Dr. When was the debt incurred? Suite 124 Lewisville, TX 75067 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes medical services Other. Specify 4.4 **Advocate Medical Group** Last 4 digits of account number 7929 \$66.94 Nonpriority Creditor's Name 8550 W. Bryn Mawr Avenue When was the debt incurred? 8th Floor Chicago, IL 60631 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical services ☐ Yes

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Debtor 1 Sarah Weller Case number (if know) 4.5 \$282.00 Cda/Pontiac Last 4 digits of account number 7949 Nonpriority Creditor's Name Attn:Bankruptcy When was the debt incurred? **Opened 10/16** Po Box 213 Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Pronger Smith Clinic ☐ Yes 4.6 Citibank Last 4 digits of account number 1957 \$3,859.00 Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Opened 06/14 Last Active **Bankruptcy** When was the debt incurred? 9/09/16 Po Box 790040 S Louis, MO 63129 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other. Specify 4.7 **Ford Motor Credit** \$5,952.00 Last 4 digits of account number 1060 Nonpriority Creditor's Name **National Bankruptcy Service Center** Opened 05/12 Last Active When was the debt incurred? 1/30/17 Po Box 62180 Colorado Springs, CO 80962 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes **Automobile** Other. Specify

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Debtor 1 Sarah Weller Case number (if know) 4.8 \$409.45 **ICS Collection Service** Last 4 digits of account number 3627 Nonpriority Creditor's Name PO Box 1010 When was the debt incurred? Tinley Park, IL 60477-9110 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Medical collections for Advocate Medical** Other. Specify ☐ Yes Group 4.9 **Lending Club Corp** Last 4 digits of account number 0309 \$9,628.00 Nonpriority Creditor's Name 71 Stevenson St Opened 04/16 Last Active Suite 300 When was the debt incurred? 1/04/17 San Francisco, CA 94105 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unsecured ☐ Yes 4.1 Synchrony Bank/TJX 2078 \$1,211,00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 07/16 Last Active When was the debt incurred? Po Box 956060 10/25/16 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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Deptoi	Saran weller		Ca	ise ii	iumber (#	know)		
4.1 1	Universtiy of Chicago	Last 4 digits of account numbe	er					\$38,094.00
	Nonpriority Creditor's Name 5841 South Maryland Avenue Chicago, IL 60637-1447	When was the debt incurred?	_					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the clair	n is: C	Check	all that ap	ply		
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecui	red cla	aim:				
	☐ Check if this claim is for a community	☐ Student loans						
	debt	☐ Obligations arising out of a se	paratio	on aq	reement or	r divorce that yo	ou did not	
	Is the claim subject to offset?	report as priority claims				,		
	■ No	Debts to pension or profit-sha	ring pl	ans,	and other s	similar debts		
	Yes	Other. Specify						
4.1	US Bank/Rms CC	Last 4 digits of account numbe	er 4	713				\$10,025.00
	Nonpriority Creditor's Name	_				_		
	Card Member Services					5 Last Acti	ve	
	Po Box 108 St Louis, MO 63166	When was the debt incurred?	_1	0/04	/16			
	Number Street City State Zlp Code	As of the date you file, the clair	n is: (Check	all that ap	ply		
	Who incurred the debt? Check one.	•			·			
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecui	red cla	aim:				
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a se report as priority claims	paratio	on ag	reement or	r divorce that yo	ou did not	
	■ No	Debts to pension or profit-sha	ring pl	ans,	and other s	similar debts		
	□Yes	■ Other. Specify Credit Ca	rd					
		- Other. Specify						
Part 3:	List Others to Be Notified About a Deb	t That You Already Listed						
is tryi have	nis page only if you have others to be notified a ing to collect from you for a debt you owe to so more than one creditor for any of the debts that ed for any debts in Parts 1 or 2, do not fill out o	meone else, list the original creditor you listed in Parts 1 or 2, list the ad	in Pa	rts 1	or 2, then	list the collect	tion agency here	e. Similarly, if you
		On which entry in Part 1 or Part 2 did yo			•			
		Line 4.10 of (<i>Check one</i>):				ith Priority Unse		
	nologies ox 9091		■ Pa	art 2:	Creditors w	ith Nonpriority I	Unsecured Claim	IS
	son City, TN 37615							
		ast 4 digits of account number		20	078			
Part 4:	Add the Amounts for Each Type of Un	secured Claim						
	the amounts of certain types of unsecured clain of unsecured claim.	ns. This information is for statistica	l repo	rting	purposes	only. 28 U.S.C	. §159. Add the	amounts for each
						Total Claim		
	6a. Domestic support obligations		6	a.	\$		0.00	
	Total aims							
from F		you owe the government	6	b.	\$		0.00	
	6c. Claims for death or personal i	njury while you were intoxicated	6	ic.	\$		0.00	

6d.

6d. Other. Add all other priority unsecured claims. Write that amount here.

0.00

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Debtor 1 Sarah Weller

	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
Total	6f.	Student loans	6f.	\$ Total Claim 0.00
claims from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 70,795.59
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 70,795.59

		DOCUME	ni Paue 26 di 49	
Fill in this infor	mation to identify your	case:		
Debtor 1	Sarah Weller			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is a amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
0	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	J.,,		State		

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		DUGUILE	sui Paue // c	11 49	
Fill in this i	information to identify your	case:			
Debtor 1	Sarah Weller				
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)	er				☐ Check if this is an
					amended filing
Official	Form 106H				
	ule H: Your Cod	obtors			12/15
Scried	ule II. Toul Cou	CDIOIS			12/15
1. Do y	and case number (if known) ou have any codebtors? (If	, ,		as a codebtor.	
■ No □ Yes					
	in the last 8 years, have you a, California, Idaho, Louisiana,				y states and territories include
	Go to line 3. Did your spouse, former spor	use, or legal equivalent live	e with you at the time?		
			•		
in line 2 Form 1	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor ame, Number, Street, City, State and Z	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, line	۵
	lame			Schedule E/F, I	
				☐ Schedule G, lin	e
N	lumber Street				
С	City	State	ZIP Code		
3.2				☐ Schedule D, line	Δ
	lame			Schedule E/F, I	
				☐ Schedule G, lin	
N	lumber Street			_	
С	City	State	ZIP Code		

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Fill	in this information to identify your ca	356.								
	btor 1 Sarah Welle									
	btor 2 buse, if filing)				_					
Uni	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
(If kr	se number					☐ An ☐ A s	income a	d filing ent showing p as of the follo		
_	chedule I: Your Inc	ome				MN	M / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The property of the ployment of the ployment are the ployment of t	are married and not filing wi	ng jointly, and your s ith you, do not includ	spouse i de inforr	s livi natio	ing with y on about y	ou, incluyour spo	ude informat ouse. If more	ion about space is	your needed,
1.	Fill in your employment information.		Debtor 1			ı	Debtor 2	or non-filing	g spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Emplo	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not er	mployed		
	employers.	Occupation	Expeditor							
	Include part-time, seasonal, or self-employed work.	Employer's name	Affiliated Steam	& Hot	Wat	er				
	Occupation may include student or homemaker, if it applies.	Employer's address	12424 South Lo Alsip, IL 60803	mbard l	Lane	e 				
		How long employed the	here? <u>13</u>							
Pai	rt 2: Give Details About Mor	nthly Income								
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to re	eport for	any I	ine, write S	\$0 in the	space. Includ	de your no	n-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all e	mplo	yers for th	nat perso	n on the lines	below. If	you need
						For Debt	tor 1	For Debto non-filing		
2.	List monthly gross wages, sala deductions). If not paid monthly, or			2.	\$	4,1	161.00	\$	N/A	-
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	

Calculate gross Income. Add line 2 + line 3.

4,161.00

N/A

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Deb	tor 1	Sarah Weller	-	C	case i	number (<i>if ki</i>	nown)				
					For	Debtor 1			or Debtor on-filing s		
	Cop	by line 4 here	4.		\$	4,161	.00	\$		N/A	<u>\</u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ì.	\$	833	2.00	\$		N/A	\
	5b.	Mandatory contributions for retirement plans	5b		<u>*</u> —		0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c) .	\$		0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d	i.	\$	180	0.00	\$		N/A	<u></u>
	5e.	Insurance	5e		\$	230	0.00	\$		N/A	<u>\</u>
	5f.	Domestic support obligations	5f.		\$_		0.00	. \$		N/A	_
	5g.	Union dues	5g		\$		0.00	. \$		N/A	
	5h.	Other deductions. Specify:	_ 5n		\$	(0.00	+ \$		N/A	<u>\</u>
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,242		. \$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,919	0.00	. \$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$,		\$		NI//	
	8b.	Interest and dividends	8b		_{\$} —		0.00 0.00	. \$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c		\$ \$		0.00			N/A	_
	8d.	Unemployment compensation	8d		_{\$} —		0.00	. \$		N/A	_
	8e.	Social Security	8e		<u>*</u> —		0.00	\$		N/A	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g		\$		0.00	\$ ₋		N/A N/A	_
	8h.	Other monthly income. Specify:	_		\$ —			. + \$		N/A	_
								· •			<u>-</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	<u> </u>	(0.00	\$_		N/	Ά
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$:	2,919.00	+ \$		N/A	= \$	2,919.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		· –		_,,				[_	
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe			•			Schedule	e J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certainlies								\$	2,919.00
13.	Do	you expect an increase or decrease within the year after you file this form	?							Comb	ined Ily income
		No.									

Official Form 106I Schedule I: Your Income page 2

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Fill	in this information to identify your case:		l		
	· ·		Choc	k if this is:	
Deb	Sarah Weller			An amended filing	
	otor 2				ving postpetition chapter
(Spo	ouse, if filing)			13 expenses as or	the following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILL	LINOIS	Ī	MM / DD / YYYY	
Cas	se number				
(If kı	nown)				
Of	fficial Form 106J				
	chedule J: Your Expenses				12/1
Be info	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to the mber (if known). Answer every question.				
Par 1.	t 1: Describe Your Household Is this a joint case?				
••	No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expense	ses for Separate House	ehold of Debt	or 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	•		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Daughter		2	Yes
					□ No
					☐ Yes ☐ No
					☐ Yes
					□ No
					☐ Yes
3.	Do your expenses include ■ No				
	expenses of people other than yourself and your dependents?				
	<u> </u>				
Est exp	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless benses as of a date after the bankruptcy is filed. If this is a sublicable date.				
the	lude expenses paid for with non-cash government assistand value of such assistance and have included it on <i>Schedule</i> ficial Form 106l.)			Your exp	enses
•	,				
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	e. Include first mortgag	e 4. \$		630.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		50.00
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as 	home equity loops	4d. \$ 5. \$		0.00
J.	Additional mortgage payments for your residence, Such as	HOLLIE EURITA IOSUS	ა. ა		U.UU

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ebtor 1	Sarah Weller	Case num	ber (if known)	
Utiliti	es:			
	Electricity, heat, natural gas	6a.	\$	100.00
	Water, sewer, garbage collection	6b.	\$	80.00
	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	120.00
	Other. Specify:	6d.	·	0.00
	and housekeeping supplies	7.	·	400.00
	care and children's education costs	7. 8.	\$	
-			·	800.00
	ing, laundry, and dry cleaning	9.	\$	50.00
	onal care products and services	10.	·	40.00
	cal and dental expenses	11.	\$	50.00
	sportation. Include gas, maintenance, bus or train fare. It include car payments.	12.	\$	120.00
	tainment, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
	table contributions and religious donations	14.	· ·	0.00
	-	14.	Ψ	0.00
5. Insur a	ance. It include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.		145.00
	Other insurance. Specify:	15d.		0.00
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
Specif		16.	\$	0.00
	Iment or lease payments:		<u> </u>	0.00
	Car payments for Vehicle 1	17a.	\$	260.00
	Car payments for Vehicle 2	17b.	· -	0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	·	0.00
	payments of alimony, maintenance, and support that you did not report as		Ψ	0.00
	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	payments you make to support others who do not live with you.		\$	0.00
Specif		19.		
•	real property expenses not included in lines 4 or 5 of this form or on Sche	dule I: Yo	our Income.	
	Mortgages on other property	20a.		0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.	\$	0.00
	: Specify:	21.	·	0.00
			. •	0.00
	late your monthly expenses			
	Add lines 4 through 21.		\$	2,845.00
22b. (Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. <i>F</i>	Add line 22a and 22b. The result is your monthly expenses.		\$	2,845.00
				,
	late your monthly net income.		•	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.		2,919.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,845.00
	Subtract your monthly expenses from your monthly income.	23c.	\$	74.00
	The result is your <i>monthly net income</i> .	230.	Ψ	1 7.00
1 Dove	ou expect an increase or decrease in your expenses within the year after yo	u file this	form?	
	ample, do you expect to finish paying for your car loan within the year or do you expect your			or decrease because
FOL 6x			,	200.0000 boodago (
	cation to the terms of your mortgage?			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Sarah Weller				
5 1 4 6	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number _ (if known)					☐ Check if this is an amended filing
Official Forr	n 106Dec				
Declarat	ion About a	ın Individual	Debtor's Sc	hedules	12/15
obtaining money years, or both. 1		n connection with a bank		Making a false statement n fines up to \$250,000, or	t, concealing property, or imprisonment for up to 20
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes. N	Name of person				y Petition Preparer's Notice, Signature (Official Form 119)
	Ity of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed	d with this declaration and	d
X /s/ Sar	ah Weller		X		

Signature of Debtor 2

Date

Sarah Weller Signature of Debtor 1

Date March 7, 2017

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Fill	in this inform	nation to identify you	r case:			
Deb	tor 1	Sarah Weller				
Dob	tor 2	First Name	Middle Name	Last Name		
	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bar	kruptcy Court for the:	NORTHERN DISTRICT O	OF ILLINOIS		
Cas	e number					
(if kno					-	Check if this is an imended filing
						iniciaca ming
~ (–	4.07				
	ficial For					
Sta	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16
					equally responsible for sup	
		ore space is needed,). Answer every que		this form. On the top of any	additional pages, write you	ur name and case
iuiii		,				
Par			rital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married					
	Not mari	ried				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<u>.</u>	
		. ,	·	·		
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	Milateles als elle	-10				2 (0
					ity property state or territor co, Texas, Washington and V	
	_	•	, ,	,	, ,	,
	■ No			W : 1 E 40011)		
	☐ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Par	Explain	n the Sources of You	r Income			
4.			nployment or from operatin u received from all jobs and a		ear or the two previous cale time activities.	ndar years?
			have income that you receive			
	□ No					
	_ '''	in the details.				
	100.1	in the detaile.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.	Gross income (before deductions
			onoon all that apply.	exclusions)	oncon all that apply.	and exclusions)
Fro	m January 1	of current year until	■ Wages, commissions,	\$8,234.00	☐ Wages, commissions,	
		d for bankruptcy:	wages, commissions, bonuses, tips	+ 5,=5 66	bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Desc Main Page 34 of 49 Case number (if known) Document Debtor 1 Sarah Weller Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$48,577.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$42,407.00 ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income Gross income from Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6	Are either Debter 1's	or Debtor 2's debts primarily consumer	dahte?

□ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

□ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

Creditor's Name and Address Amount you Was this payment for ... Dates of payment **Total amount** still owe paid

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	Sarah Weller		C	ase number (if known)		
<i>Insi</i> of w a bu	hin 1 year before you filed for bankr ders include your relatives; any genera which you are an officer, director, perso usiness you operate as a sole proprieto nony.	al partners; relatives of any ge in in control, or owner of 20%	neral partners; parti or more of their voti	nerships of which yo ng securities; and ar	u are a general p ny managing age	partner; corporation ent, including one f
	No Yes. List all payments to an insider.					
Ins	ider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	is payment
insi	hin 1 year before you filed for bankr der? ude payments on debts guaranteed or		yments or transfer	any property on a	ccount of a deb	t that benefited a
	No Yes. List all payments to an insider					
Ins	sider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	
art 4:	Identify Legal Actions, Reposses	sions and Foreclosures				
	No Yes. Fill in the details.				0	
Ca	se title	Nature of the case	Court or agenc	у	Status of the	case
Ca	se number					
). Witl	hin 1 year before you filed for bankr ck all that apply and fill in the details b No. Go to line 11.		perty repossessed,	foreclosed, garnis	shed, attached, s	seized, or levied?
D. Witl Che	hin 1 year before you filed for bankreck all that apply and fill in the details b			foreclosed, garnis	hed, attached, s	
D. Witl Che	hin 1 year before you filed for bankreck all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below.	elow.			hed, attached, s	Value of th
O. With Che	hin 1 year before you filed for bankreck all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below. editor Name and Address ord Motor Credit	Describe the Property				Value of th propert
Cree	hin 1 year before you filed for bankreck all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below. editor Name and Address	Describe the Property	ed sessed. sed.	Date		Value of th propert
Cre	hin 1 year before you filed for bankreck all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below. Beditor Name and Address and Motor Credit 19401	Describe the Property Explain what happene Property was repose Property was forecle	ed eessed. esed. hed.	Date		Value of th propert
Cree Fo De De 1. Witl	hin 1 year before you filed for bankreck all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below. editor Name and Address and Motor Credit ept 19401 etroit, MI 48255-1941 etroit, MI 48255-1941	Describe the Property Explain what happene Property was repose Property was forecle Property was garnis Property was attach	edsessed. essed. hed. ed, seized or levied.	Date 12/20	0/16	Value of th propert \$6,000.0
Cree Fo De De 1. Witl	hin 1 year before you filed for bankreck all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below. Peditor Name and Address Fird Motor Credit 19401 Petroit, MI 48255-1941	Describe the Property Explain what happene Property was repose Property was forecle Property was garnis Property was attach	edsessed. essed. hed. ed, seized or levied.	Date 12/20	0/16	Value of the propert

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

■ No

☐ Yes

Case 17-06963 Doc 1 Filed 03/07/17 Entered 03/07/17 14:37:05 Desc Main Page 36 of 49 Case number (if known) Document Debtor 1 Sarah Weller Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☐ No

Yes. Fill in the details.

Person Who Was Paid Address **Email or website address** Person Who Made the Payment, if Not You

Tucker & Associates, Ltd 5210 West 95th Street Oak Lawn, IL 60453

Description and value of any property transferred

Date payment or transfer was made

Amount of payment

February 2017

\$1,200.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

Yes. Fill in the details.

Person Who Was Paid **Address**

Description and value of any property transferred

Date payment or transfer was made

Amount of payment

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Debtor 1 Sarah Weller

8.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your bu Include both outright transfers and transfers mainclude gifts and transfers that you have already No	usiness or financial affa de as security (such as t	airs? the granting of a s		• • •	
	☐ Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and v property transfer		payme	ibe any property or ents received or debts n exchange	Date transfer was made
	Person's relationship to you				-	
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot		y property to a s	self-settle	d trust or similar device	of which you are a
	No Yes, Fill in the details.					
	Name of trust	Description and v	value of the prop	erty trans	ferred	Date Transfer was
			ши ст ше ргор			made
Par	t 8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and Sto	rage Unit	s	
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred?	, were any financial ac	counts or instru	ments he	ld in your name, or for y	our benefit, closed,
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.					
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution and	Last 4 digits of	Type of accou	nt or	Date account was	Last balance
	Address (Number, Street, City, State and ZIP Code)	account number	instrument		closed, sold, moved, or transferred	before closing or transfer
21.	Do you now have, or did you have within 1 yearsh, or other valuables?	ear before you filed for	bankruptcy, an	y safe dep	oosit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe t	the contents	Do you still have it?
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?					
	■ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe 1	the contents	Do you still have it?
Dar	t 9: Identify Property You Hold or Control f	for Samaana Elsa				
ı aı	identify Property Tou Hold of Control I	or someone Lise				
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.					
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe t	the property	Value
Par	t 10: Give Details About Environmental Info	rmation				
	the nurnose of Part 10, the following definition					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5

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Debtor 1 Sarah Weller

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statut regulations controlling the cleanup of these substances, wastes, or material.				statutes or			
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or us to own, operate, or utilize it, including disposal sites.						
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.						
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of when	they occurred.				
24.	Has any governmental unit notified you that yo	น may be liable or potentially liable เ	under or in violation of an environm	nental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any release of hazardous material?						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or admini	strative proceeding under any enviro	onmental law? Include settlements	and orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Pai	t 11: Give Details About Your Business or Cor	nnections to Any Business					
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?						
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company	(LLC) or limited liability partnership	(LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation						

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

Describe the nature of the business

Name of accountant or bookkeeper

Business Name

Address

Yes. Fill in the details below.

(Number, Street, City, State and ZIP Code)

No. None of the above applies. Go to Part 12.

Name **Address** (Number, Street, City, State and ZIP Code) **Date Issued**

☐ An owner of at least 5% of the voting or equity securities of a corporation

Yes. Check all that apply above and fill in the details below for each business.

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6

Employer Identification number

Dates business existed

Do not include Social Security number or ITIN.

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Debtor 1 Sarah Weller

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Sarah Weller

Signature of Debtor 2 Sarah Weller Signature of Debtor 1 Date March 7, 2017 Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your	case:		
Debtor 1	Sarah Weller			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIST	FRICT OF ILLINOIS	
Cana awahan				
Case number (if known)				☐ Check if this is an
				amended filing
Official Fo	orm 108			
Stateme	nt of Intentio	n for Indiv	riduals Filing Under Chapt	er 7
	lividual filing under cha		l out this form if:	
	e claims secured by yo			
	sed personal property a		ot expired. you file your bankruptcy petition or by the date s	at for the meeting of creditors
			e time for cause. You must also send copies to the	
on the	form			
	eople are filing togethen	r in a joint case, bo	th are equally responsible for supplying correct i	nformation. Both debtors must
Be as complete	and accurate as possib	le. If more space is	s needed, attach a separate sheet to this form. On	the top of any additional pages.
	our name and case nur			and top of any additional pages,
Part 1: List Y	our Creditors Who Have	e Secured Claims		
			: Creditors Who Have Claims Secured by Propert	v (Official Form 106D) fill in the
information b		art i oi schedule D	. Creditors with have Claims Secured by Propert	y (Official Form 100D), fill in the
Identify the cr	reditor and the property t	hat is collateral	What do you intend to do with the property that secures a debt?	t Did you claim the property as exempt on Schedule C?
Creditor's E	Bank Of The West		☐ Surrender the property.	□No
name:			☐ Retain the property and redeem it.	
Description of	f Hyundai Elantra		■ Retain the property and enter into a	Yes
property	Hyundai Elanda		Reaffirmation Agreement. Retain the property and [explain]:	
securing debt	:		Retain the property and [explain].	_
0 11: 1			_	_
Creditor's (name:	Js Bank Home Mortg	age	☐ Surrender the property.	□ No
name.			☐ Retain the property and redeem it. ☐ Retain the property and enter into a	■ Yes
Description of	f 116 Hubbard Stree	et Thornton, IL	Reaffirmation Agreement.	100

Part 2: List Your Unexpired Personal Property Leases

60476 Cook County

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Retain the property and [explain]:

Continue making mortgage payments

Describe your unexpired personal property leases

Will the lease be assumed?

property

securing debt:

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Del	btor 1	Sarah Weller	Case number (if known)
			_
	ssor's n		□ No
	scription perty:	n of leased	☐ Yes
Les	ssor's n	ame:	□ No
		n of leased	
Pro	perty:		☐ Yes
	ssor's n		□ No
	scription perty:	n of leased	☐ Yes
	ssor's n	ame: n of leased	□ No
	perty:	TO Teaseu	☐ Yes
	ssor's n		□ No
		n of leased	<u>_</u>
Pro	perty:		☐ Yes
	ssor's n		□ No
	scriptio perty:	n of leased	П у
	porty.		☐ Yes
	ssor's n		□ No
	scription perty:	n of leased	☐ Yes
Dat	rt 3:	Sign Below	
га	ι ο.	Sign below	
Und	ler pen	alty of perjury, I declare that I have indic	ted my intention about any property of my estate that secures a debt and any personal
pro	perty th	nat is subject to an unexpired lease.	
X		arah Weller	X
		h Weller	Signature of Debtor 2
	Signa	ature of Debtor 1	
	Date	March 7, 2017	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$24	5	filing fee	
\$7	5	administrative fee	
+ \$1	5	trustee surcharge	
\$33	5	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-06963 Doc 1 Filed 03/07/17 Entered 03/07/17 14:37:05 Desc Main Document Page 46 of 49

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	Sarah Weller		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSAT	TION OF ATTOR	NEY FOR DE	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I ce compensation paid to me within one year before the filing of the be rendered on behalf of the debtor(s) in contemplation of or in	e petition in bankruptcy, o	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,200.00
	Prior to the filing of this statement I have received		\$	1,200.00
	Balance Due			0.00
2.	\$ of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compensation	n with any other person u	nless they are memb	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the same of the copy of the agreement.			
6.	In return for the above-disclosed fee, I have agreed to render leg	gal service for all aspects	of the bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and rendering adb. b. Preparation and filing of any petition, schedules, statement of the debtor at the meeting of creditors and of the debtor in adversary proceedings and of the debtor in adversary proceedings. 	of affairs and plan which r confirmation hearing, and	nay be required; I any adjourned hea	
7.	By agreement with the debtor(s), the above-disclosed fee does n	not include the following s	service:	
	CER	RTIFICATION		
this	I certify that the foregoing is a complete statement of any agreement of a second of a s	ment or arrangement for p	payment to me for re	epresentation of the debtor(s) in
ı	March 7, 2017	/s/ Cheri Costa wT	ucker & Associa	tes, Ltd. ARDC
_	Date	Cheri Costa wTucl	ker & Associates	, Ltd. ARDC 6285966
		Signature of Attorney TUCKER & ASSOC		
		5210 West 95th Str	reet	
		Oak Lawn, IL 6045 708/425.9530 Fax		
		Name of law firm		

United States Bankruptcy Court Northern District of Illinois

In re	Sarah Weller		Case No.				
		Debtor(s)	Chapter 7				
	VERIFICATION OF CREDITOR MATRIX						
		Number of	f Creditors:	15			
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of credi	itors is true and correct to	the best of my			
Date:	March 7, 2017	/s/ Sarah Weller Sarah Weller Signature of Debtor					

Cheri Costa wTucker & Associates, Ltd. ARDC TUCKER & ASSOCIATES, LTD. 5210 West 95th Street Oak Lawn, IL 60453

Sarah Weller 116 Hubbard Street Thornton, IL 60476

Advanceed Call Center Technologies PO Box 9091 Johnson City, TN 37615

Advocate Health Care PO Box 3039 Hinsdale, IL 60522-3039

Advocate Medical Group 8550 W. Bryn Mawr Avenue 8th Floor Chicago, IL 60631

Bank Of The West 2527 Camino Ramon San Ramon, CA 94583

Cda/Pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364

Citibank Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 S Louis, MO 63129

Ford Motor Credit National Bankruptcy Service Center Po Box 62180 Colorado Springs, CO 80962

ICS Collection Service PO Box 1010 Tinley Park, IL 60477-9110

Lending Club Corp 71 Stevenson St Suite 300 San Francisco, CA 94105

Synchrony Bank/TJX Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

Universtiy of Chicago 5841 South Maryland Avenue Chicago, IL 60637-1447

Us Bank Home Mortgage Attn: Bankruptcy Po Box 5229 Cincinnati, OH 45201

US Bank/Rms CC Card Member Services Po Box 108 St Louis, MO 63166